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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<b>Attorney Docket No.</b> N0520.0047/P047 <b>First Inventor</b> Shinichiro Fukuoka <b>Title</b> ARTICLE MANAGEMENT SYSTEM, NONCONTACT ELECTRONIC TAG, ARTICLE MANAGEMENT METHOD, AND COMPUTER- <b>Express Mail Label No.</b>																																					
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>MS Patent Application</b> <b>ADDRESS TO:</b> Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																																					
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small> 3. <input checked="" type="checkbox"/> Specification <span style="border: 1px solid black; padding: 2px;">[Total Pages 58]</span> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (<i>if filed</i>)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul> 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="border: 1px solid black; padding: 2px;">[Total Sheets 18]</span> 5. Oath or Declaration <span style="border: 1px solid black; padding: 2px;">[Total Sheets 5]</span> <ul style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))  <small>(for continuation/divisional with Box 18 completed)</small> <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b>  <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></li> </ul> </li> </ul> 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program ( <i>Appendix</i> ) 8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li> <li>b. Specification Sequence Listing on:           <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper</li> </ul> </li> <li>c. <input type="checkbox"/> Statements verifying identity of above copies</li> </ul>																																					
<b>ACCOMPANYING APPLICATION PARTS</b> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">9.</td> <td style="width: 10%;"><input checked="" type="checkbox"/></td> <td>Assignment Papers (cover sheet &amp; document(s))</td> <td></td> </tr> <tr> <td>10.</td> <td><input type="checkbox"/></td> <td>37 CFR 3.73(b) Statement <i>(when there is an assignee)</i></td> <td><input type="checkbox"/> Power of Attorney</td> </tr> <tr> <td>11.</td> <td><input type="checkbox"/></td> <td>English Translation Document (<i>if applicable</i>)</td> <td></td> </tr> <tr> <td>12.</td> <td><input checked="" type="checkbox"/></td> <td>Information Disclosure Statement (IDS)/PTO-1449</td> <td><input checked="" type="checkbox"/> Copies of IDS Citations</td> </tr> <tr> <td>13.</td> <td><input type="checkbox"/></td> <td>Preliminary Amendment</td> <td></td> </tr> <tr> <td>14.</td> <td><input checked="" type="checkbox"/></td> <td>Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></td> <td></td> </tr> <tr> <td>15.</td> <td><input type="checkbox"/></td> <td>Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></td> <td></td> </tr> <tr> <td>16.</td> <td><input type="checkbox"/></td> <td>Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).</td> <td></td> </tr> <tr> <td>17.</td> <td><input checked="" type="checkbox"/></td> <td>Other: <span style="border: 1px solid black; padding: 2px;">Claim for Priority</span></td> <td></td> </tr> </table>				9.	<input checked="" type="checkbox"/>	Assignment Papers (cover sheet & document(s))		10.	<input type="checkbox"/>	37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>	<input type="checkbox"/> Power of Attorney	11.	<input type="checkbox"/>	English Translation Document ( <i>if applicable</i> )		12.	<input checked="" type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449	<input checked="" type="checkbox"/> Copies of IDS Citations	13.	<input type="checkbox"/>	Preliminary Amendment		14.	<input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>		15.	<input type="checkbox"/>	Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>		16.	<input type="checkbox"/>	Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).		17.	<input checked="" type="checkbox"/>	Other: <span style="border: 1px solid black; padding: 2px;">Claim for Priority</span>	
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)    of prior application No.: _____ <small>Prior application information: Examiner _____ Art Unit: _____</small>																																							
<b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.																																							
<b>19. CORRESPONDENCE ADDRESS</b>																																							
<input checked="" type="checkbox"/> Customer Number: <span style="border: 1px solid black; padding: 2px;">24998</span>		<input type="checkbox"/> Correspondence address below																																					
Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Thomas J. D'Amico																																						
Address	2101 L Street NW																																						
City	Washington	State	DC																																				
Country	US	Telephone	(202) 785-9700																																				
Name (Print/Type)		Registration No. (Attorney/Agent)																																					
Thomas J. D'Amico		28,371																																					
Signature		Date	October 29, 2003																																				

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U.S.PTOUse in lieu of PTO/SB/17 (08-03)  
(Form updated to reflect FY 2004 fees effective 10/1/03)

<b>FEE TRANSMITTAL for FY 2004</b>		<b>Complete if Known</b>																																																																																																																																																														
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<b>METHOD OF PAYMENT (check all that apply)</b>		<b>FEE CALCULATION (continued)</b>																																																																																																																																																														
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number      04-1073 Deposit Account Name        Dickstein Shapiro Morin & Oshinsky LLP The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		<b>3. ADDITIONAL FEES</b> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th colspan="2">Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th></th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge – late filing fee or oath</td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge – late provisional filing fee or cover sheet.</td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for ex parte reexamination</td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td>Extension for reply within first month</td> </tr> <tr> <td>1252</td> <td>420</td> <td>2252</td> <td>210</td> <td>Extension for reply within second month</td> </tr> <tr> <td>1253</td> <td>950</td> <td>2253</td> <td>475</td> <td>Extension for reply within third month</td> </tr> <tr> <td>1254</td> <td>1,480</td> <td>2254</td> <td>740</td> <td>Extension for reply within fourth month</td> </tr> <tr> <td>1255</td> <td>2,010</td> <td>2255</td> <td>1,005</td> <td>Extension for reply within fifth month</td> </tr> <tr> <td>1401</td> <td>330</td> <td>2401</td> <td>165</td> <td>Notice of Appeal</td> </tr> <tr> <td>1402</td> <td>330</td> <td>2402</td> <td>165</td> <td>Filing a brief in support of an appeal</td> </tr> <tr> <td>1403</td> <td>290</td> <td>2403</td> <td>145</td> <td>Request for oral hearing</td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>1451</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td>Petition to revive – unavoidable</td> </tr> <tr> <td>1453</td> <td>1,330</td> <td>2453</td> <td>665</td> <td>Petition to revive - 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Name (Print/Type)	Thomas J. D'Amico		Registration No. (Attorney/Agent)	28,371	Telephone (202) 828-2232																																																																																																																																																											
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